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1835 U.S.P.T.O.

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**UTILITY
PATENT APPLICATION
TRANSMITTAL**

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No.:	CM06657LL
First Inventor:	FARRELL, KEVIN C.
Title:	APPARATUS FOR IMMOBILIZING A SOLID SOLDER ELEMENT TO A CONTACT SURFACE OF INTEREST
Express Mail Label No.:	EL 962737342 US

APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

1. <input checked="" type="checkbox"/> Fee Transmittal Form in duplicate (Submit an original and a duplicate for fee processing)	7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)
2. <input type="checkbox"/> Applicant claims small entity status See 37 CFR 1.27	8. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence (if applicable, all necessary)
3. <input checked="" type="checkbox"/> Specification [Total Pages 12] (preferred arrangement set forth below) -Descriptive title of the invention -Cross Reference to Related Applications -Statement Regarding Fed sponsored R&D -Reference to sequence listing, a table, or a computer program listing appendix -Background of the Invention -Brief Summary of the Invention -Brief Description of the Drawings (if filed) -Detailed Description -Claim(s) -Abstract of the Disclosure	a. <input type="checkbox"/> Computer Readable Form (CFR) b. <input type="checkbox"/> Specification Sequence Listing on: i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); ii. <input type="checkbox"/> or paper c. <input type="checkbox"/> Statements verifying identify of above copies
4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets 1]	9. <input checked="" type="checkbox"/> Assignment Papers (cover sheet & document(s))
5. Oath or Declaration [Total Pages 4]	10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power of (when there is an assignee) Attorney
a. <input checked="" type="checkbox"/> Newly executed (original or copy) b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) (for continuation/ divisional with Box 18 completed)	11. <input type="checkbox"/> English Translation Document (if applicable)
i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).	12. <input type="checkbox"/> Information Disclosure <input type="checkbox"/> Copies of IDS Statement (IDS)/PTO-1449 Citations
6. <input checked="" type="checkbox"/> Application Data Sheet under 37 CFR 1.76	13. <input type="checkbox"/> Preliminary Amendment
18. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76: <input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in- Part (CIP) of Prior Appl. No. _____	14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (Should be specifically itemized)
Prior Appl. information: _____	15. <input type="checkbox"/> Certified Copy of Priority Document (if foreign priority is claimed)
Examiner: _____	16. <input type="checkbox"/> Nonpublication Request and Certification under 35 U.S.C. 122(b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent
	17. <input type="checkbox"/> Other: _____

19. CORRESPONDENCE ADDRESS

<input checked="" type="checkbox"/> Customer Number or Bar Code Label	*24273*		<input type="checkbox"/> or <input type="checkbox"/> Correspondence address below
Name			
Address			
City	State	Zip Code	
Country	U.S.A.	Telephone	(954) 723-6449
Name	Barbara R. Doutre		Fax (954) 723-5599
SIGNATURE	<i>Barbara R. Doutre</i>		Date 2/23/04

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22278 10/786578

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FEE TRANSMITTAL for FY 2003 Patent fees are subject to annual revision <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Complete if Known	
		Application No.	
		Filing Date	
		First Named Inventor	FARRELL, KEVIN C.
		Examiner Name	
Group Art Unit			
TOTAL AMOUNT OF PAYMENT	(\$ 896.00)	Attorney Docket No.	CM06657LL

METHOD OF PAYMENT (check all that apply)		FEE CALCULATION (continued)																																																																																																																																																																																																																								
<input type="checkbox"/> Check <input type="checkbox"/> Credit card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None <input checked="" type="checkbox"/> Deposit Account Deposit Account Number 50-2117 Deposit Account Name Motorola, Inc.		3. ADDITIONAL FEES <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Large Entity</th> <th style="text-align: left;">Small Entity</th> <th></th> </tr> <tr> <th>Fee</th> <th>Fee</th> <th>Fee</th> <th>Fee</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> <tr> <th>Code</th> <th>\$</th> <th>Code</th> <th>\$</th> <th></th> <th></th> </tr> </thead> <tbody> <tr><td>1051</td><td>130</td><td>2051</td><td>65</td><td>Surcharge - late filing fee or oath</td><td></td></tr> <tr><td>1052</td><td>50</td><td>2052</td><td>25</td><td>Surcharge - late Provisional filing</td><td></td></tr> <tr><td>1053</td><td>130</td><td>1053</td><td>130</td><td>Non-English specification</td><td></td></tr> <tr><td>1812</td><td>2520</td><td>1812</td><td>2520</td><td>For filing a request for ex parte Reexamination</td><td></td></tr> <tr><td>1804</td><td>920*</td><td>1804</td><td>920*</td><td>Requesting publication of SIR prior to Examiner action</td><td></td></tr> <tr><td>1805</td><td>1840*</td><td>1805</td><td>1840*</td><td>Requesting publication of SIR after Examiner action</td><td></td></tr> <tr><td>1251</td><td>110</td><td>2251</td><td>55</td><td>Extension for reply within 1st month</td><td></td></tr> <tr><td>1252</td><td>410</td><td>2252</td><td>200</td><td>Extension for reply within 2nd month</td><td></td></tr> <tr><td>1253</td><td>930</td><td>2253</td><td>460</td><td>Extension for reply within 3rd month</td><td></td></tr> <tr><td>1254</td><td>1450</td><td>2254</td><td>720</td><td>Extension for reply within 4th month</td><td></td></tr> <tr><td>1255</td><td>1970</td><td>2255</td><td>980</td><td>Extension for reply within 5th month</td><td></td></tr> <tr><td>1401</td><td>320</td><td>2401</td><td>160</td><td>Notice of Appeal</td><td></td></tr> <tr><td>1402</td><td>320</td><td>2402</td><td>160</td><td>Filing a brief in support of an appeal</td><td></td></tr> <tr><td>1504</td><td></td><td>1504</td><td></td><td>Publication fee for early, voluntary, or normal publication</td><td></td></tr> <tr><td>1403</td><td>280</td><td>2403</td><td>140</td><td>Request for oral hearing</td><td></td></tr> <tr><td>1505</td><td>300</td><td>1505</td><td>300</td><td>Publication fee for republication</td><td></td></tr> <tr><td>1451</td><td>1510</td><td>1451</td><td>1510</td><td>Petition to institute a public use proceeding</td><td></td></tr> <tr><td>1452</td><td>110</td><td>2452</td><td>55</td><td>Petition to revive - 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						SUBTOTAL (3)	\$ 40																																																																																																																																																																																																																			

SUBMITTED BY		Complete (if applicable)		
Name (Print)	Barbara R. Doutre	Registration No. (Attorney/Agent)	39,505	
Signature		Telephone:	(954) 723-6449	
		Date	2/23/04	